

APR 6 1 2005



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PAGES (WITH COVER)

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REFERENCE NO

55979/314570

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**COMMENTS**

Applicant:	Ibanez
Title:	Use of Flumazenil in the Production of a Medicament for the Treatment of Cocaine Dependency
Serial No/Docket No.:	10/622,068
Filing Date	55979/314570 (0200)

**PAPERS SUBMITTED:**

1. PTO/SB/21 Transmittal Form
2. PTO/SB/81 Power of Attorney Correspondence of Address Indication
3. PTO/SB/96 Statement Under 37 CFR 3.73(b)

Date: April 1, 2005  
By: John K. McDonald, Ph.D., Reg. No. 42,860

**TO BE COMPLETED BY KS OPERATIONS CENTER****TRANSMISSION RECEIPT DATE/TIME:** \_\_\_\_\_**COMPLETED BY:** \_\_\_\_\_**JOB CODE** *84073*

PTO/SB/21 (09-04)

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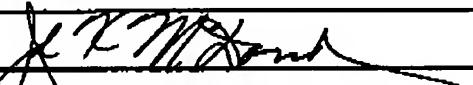
**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission **3** Attorney Docket Number **55979/314570 (0200)****ENCLOSURES (check all that apply)**

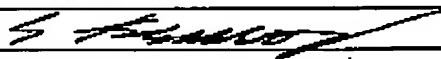
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm	Kilpatrick Stockton, LLP		
Signature			
Printed Name	John K. McDonald, Ph.D.		
Date	April 1, 2005	Reg. No.	42,860

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Typed or printed name	Steve Kennedy
Date <b>APRIL 1, 2005</b>	

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APR 01 2005

PTO/SB/01 (11-04)

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/622,068
Filing Date	July 15, 2003
First Named Inventor	Juan Jose Ibanez Legarda
Title	Use of Fluorinated or the Fluorination of Drugs for the Treatment of Alzheimer Disease
Art Unit	1614
Examiner Name	Not assigned
Attorney Docket Number	55979/314570 (0200)

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

- Practitioners associated with the Customer Number:  
OR  
 Practitioner(s) named below:

23370

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

- The address associated with the above-mentioned Customer Number:  
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 The address associated with Customer Number:  
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Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

- Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature	Chuck Timpe	Date	4/1/05
Name	Chuck Timpe	Telephone	(310) 444-4300
Title and Company	Chief Financial Officer, Myntiam, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/06 (08-04)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Hythiam, Inc.Application No./Patent No.: 10/622,088 Filed/Issue Date: July 15, 2003Entitled: Use of Flumazenil in the Production of a Medicament for the Treatment of Cocaine Dependency

Hythiam, Inc., a Corporation  
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or2.  an assignee of less than the entire right, title and interest.  
 The extent (by percentage) of its ownership interest is \_\_\_\_\_ %

in the patent application/patent identified above by virtue of either:

A. [ ] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_ Frame \_\_\_\_\_, or for which a copy thereof is attached.

**OR**

B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
 The document was recorded in the United States Patent and Trademark Office at  
 Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.2. From: \_\_\_\_\_ To: \_\_\_\_\_  
 The document was recorded in the United States Patent and Trademark Office at  
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 The document was recorded in the United States Patent and Trademark Office at  
 Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

[ ] Additional documents in the chain of title are listed on a supplemental sheet.

[ ] Copies of assignments or other documents in the chain of title are attached.  
 [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

4/1/05\_\_\_\_\_  
 Chuck Timpe

Date

\_\_\_\_\_  
 Typed or printed name(310) 444-4300Chuck Timpe

Telephone number

\_\_\_\_\_  
 SignatureChief Financial Officer\_\_\_\_\_  
 Title

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